EL PASO COMMUNITY COLLEGE
Admissions and Registrar's Office
Admissions@epcc.edu
Fax (915)831-2161
CONTINUING EDUCATION
STUDENT ADD/DROP FORM

Keeping your information **CURRENT** with EPCC is important. It helps us inform you if classes have been cancelled, if there are changes to your schedule, or if we need to contact you for any reason. Your information is kept confidential. If student is due any refunds, EPCC will send to the address on file.

EPCC ID: _____ DATE OF BIRTH (Mo/Day/Year): _____/_____/_____

LAST NAME: _____ (FIRST NAME): _____ (Middle Initial): _____

STUDENT SIGNATURE:_____ DATE:_____

ADD	CRN (SECCION)	COURSE & NUMBER (CURSO Y NUMERO)	COURSE TITLE (TITULO DEL CURSO)	START/END DATE (COMIENZO/FINAL DEL CURSO)

DROP	CRN (SECCION)	COURSE & NUMBER (CURSO Y NUMERO)	COURSE TITLE (TITULO DEL CURSO)	START/END DATE (COMIENZO/FINAL DEL CURSO)

Processed by: _____ Date: _____

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